

## Authorization Comments

354705	/ POLING, STEVEN D	710954107
DOB: 07-15-1967	Cat:	Sex: M Status: T 06-30-2012 Col: N
Case Id 733284134	Auth Id 738684134	Auth Type COLLEGIAL DISCUSSION ONLY
Facility/Prov ASHOK KRUSHNAMWAMY, MD	Attending	
Beg DOS An/Ac 04-28-2011 /	End DOS An/Ac /	/

Authorization Comment

Type  
MEDICAL COMMENTS

Resolution

Comment  
RCVD REQUEST FOR ORTHO EVAL PRESENTED IN COLLEGIAL BY DR. ATAZIA  
VM HAD INJURY THREE YEARS AGO C/O NECK PAIN X-RAY NEG NO WEAKNESS  
REVIEWED AND PENDED BY DR. SMITH CONTINUE CONSERVATIVE TX

Update Cancel

{044911.DOCX}

WEXUMRECS000001

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: Sex: M Status: T 06-30-2012 Col: N  
Case Id 895470818 Auth Id 894740818 Auth Type 04 - CLINICONSITE  
Facility/Prov RYAN PHYSICAL THERAPY Attending  
Begin DOS An/Ac 08-24-2011 / End DOS An/Ac /

Authorization Comment

Type: MEDICAL COMMENTS      Prev      Next

Resolution:

Comment:

RCVD REQUEST FOR ONSITE PHYSICAL THERAPY DUE TO C10 LEFT SIDED NECK PAIN WITH RADICULOPATHY TO THE RUE. NO IQ CRITERIA FOUND. WAS DISCUSSED IN COLLEGIAL BETWEEN DR SMITH AND PA STAUB. APPROVED.

Update      Cancel

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: Sex: M Status: T 06-30-2012 Cob: N  
Case Id 751731512 Auth Id 763881512 Auth Type 49 - PHYSIATRY  
Facility/Prov CENTER FOR REHAB, PAIN MG Attending  
Beg DDS An/Ac 11-02-2011 / End DDS An/Ac /

Authorization Comment

Type: MEDICAL COMMENTS      Prev      Next

Resolution:

Comment:

RCVD REQUEST FOR PHYSIATRY EVAL C/O CHRONIC NECK PAIN, NUMBNESS  
L ARM CANNOT FAN FINGERS 3RD AND 4TH AND 5TH DECREASED ROM  
FAILED PT NO IQ PRESENTED IN COLLEGIAL BY PA MACDONALD AND  
REVIEWED AND APPROVED BY DR. SMITH

Update      Cancel

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: M Status: T 06-30-2012 Cob: N  
Case Id 045881968 Auth Id 057921968 Auth Type 04 - CLINIC/ONSITE  
Facility/Prov RYAN PHYSICAL THERAPY Attending  
Beg DOS An/Ac 12-14-2011 / End DOS An/Ac /

Authorization Comment

Type: MEDICAL COMMENTS      Prev      Next

Resolution:

Comment:

RCVD REQUEST FOR PT OFFSITE WAS SEEN BY PHYSIATRY AND RECOMENDS OFF SITE PT FOR TRACTION ONSITE DID NOT HELP NO IQ PRESENTED IN COLLEGIAL BY PASTAUB AND REVIEWED AND APPROVED BY DR. SMITH

Update      Cancel

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: Sex: M Status: T 06-30-2012 Cob: N  
Case ID: 045881968 Auth ID: 057921988 Auth Type: 04 - CLINICONSITE  
Facility/Prov: RYAN PHYSICAL THERAPY Attending:  
Beg DOS An/Ac: 12-14-2011 / End DOS An/Ac: /

Authorization Comment

Type: MEDICAL COMMENTS      Prev      Next

Resolution:

Comment:

On-site physical therapist stated he can provide services onsite changed from off-site to on-site approved by Dr Smith.

Update      Cancel

## Authorization Comments

SS4705 / POLING, STEVEN D 710054107  
DOB: 07-15-1967 Cat: Sex: M Status: T 06-30-2012 Cbx: N  
Case Id: 197903053 Auth Id: 217103053 Auth Type: ER-A - EMERGENCY ROOM  
Facility/Prov: MERITUS MEDICAL CENTER, I Attending:  
Beg DDS An/Ac: 01-15-2012 / 01-15-2012 End DDS An/Ac: 01-15-2012 / 01-15-2012

Authorization Comment

Type: MEDICAL COMMENTS      Prev      Next

Resolution:

Comment:

rcvd fax - IM SENT FROM MCIH TO MMC ER VIA AMBULANCE ON 1/15/2012  
ACUTE ABD DISCOMFORT, R/O DIVERTICULOSIS  
ER ONLY PER EMAIL FROM REBA MCCUSKER @ MMC

Update      Cancel

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: Sex: M Status: T 06-30-2012 Cob: N  
Case Id 527051639 Auth Id 538161639 Auth Type OPH - OUTPAT/HOSPITAL  
Facility/Prov BON SECOURS BHS - HOSPITAL Attending  
Beg DOS Adm/Ac 02-23-2012 / End DOS Adm/Ac /

Authorization Comment

Type: MEDICAL COMMENTS

Resolution:

Comment:

CDO BETWEEN DR SMITH AND PA E. STAUB REGARDING A REQUEST FOR A MRI OF THE HEAD DUE TO ONE SIDED PAIN AN HEADACHE. DR SMITH REQUESTED ADD'L INFORMATION DR ALI TO RE-EVAL IM AND REPRESENT IN 1-2 WEEKS.

Update Cancel

## Authorization Comments

354705 / POLING, STEVEN D 710954107  
DOB: 07-15-1967 Cat: M Status: T 06-30-2012 Col: N  
Case Id: 527051839 Auth Id: 536181839 Auth Type: OPH - OUTPAT/HOSPITAL  
Facility/Prov: BON SECOURS BHS - HOSPITA Attending:  
Begin DDS Att/Ac: 02-23-2012 / End DDS Att/Ac: /

Authorization Comment

Type	Medical Comments	Prev	Next
Resolution			
Comment	REPRESENTED C/O NUMBNESS BOTH UPPER AND LOWER EXTREMITIES NEED TO R/O BRAIN NEOPLASM MEETS IQ REVIEWED AND APPROVED BY DR. SMITH		
<input type="button" value="Update"/> <input type="button" value="Cancel"/>			

## Authorization Comments

354705	/ POLING, STEVEN D	710954107
DOB: 07-15-1967	Cat: M	Status: T 06-30-2012 Col: H
Case Id 034680889	Auth Id 053820869	Auth Type 01 - INPATIENT/HOSP
Facility/Prov BON SECOURS BHS - HOSPITA	Attending JN SECOURS BHS - HOSPITA	
Beg DOS Adm/Adc 02-27-2012 / 02-27-2012	End DOS Adm/Adc 02-29-2012 / 02-29-2012	

Authorization Comment

Type  
MEDICAL COMMENTS

Resolution

Comment  
IM SENT FROM MCIH TO BSH VIA AMBULANCE ON 2/27/2012 AS A DIRECT ADMIT  
PER CALL FROM SITE - R/O MS

Update Cancel

